

**SUMMARY FORM****COLLECTIVE BARGAINING AGREEMENT**  
**PUBLIC SECTOR / NON-POLICE & NON-FIRE****Section I: Agreement Details**

Public Employer: Cape May County Municipal Utilities Authority County: Cape May  
 Employee Organization: Teamsters Local 331 Employees in Unit: 103  
 Base Year Contract Term: 1/1/2009 12/31/2012 New Contract Term 1/1/2013 12/31/2016  
 Type of Settlement:  Mediated Settlement  Fact-Finder Recommendation  Voluntary Settlement  Super Conciliation

|   |                  | Column A<br><u>Base Year - Total Costs</u><br>(Last Year of Previous agreement) | Column B<br><u>New Base Year - Total Costs</u><br>(First Year of Successor agreement) |
|---|------------------|---|---|
| Section II: Economic                              |                  |   |   |
| Item 1 .....                                      | Salary           | \$4,681,296   | \$4,751,515   |
| Item 2 .....                                      | Increment        |   |   |
| Item 3 .....                                      | Longevity        |   |   |
| Item 4 .....                                      |                  |   |   |
| Item 5 .....                                      |                  |   |   |
| Item 6 .....                                      |                  |   |   |
| Item 7 .....                                      |                  |   |   |
| Item 8 .....                                      |                  |   |   |
| Item 9 .....                                      |                  |   |   |
| Item 10 .....                                     |                  |   |   |
| Item 11 .....                                     |                  |   |   |
| Item 12 .....                                     |                  |   |   |
| Any additional items list on separate sheet       | Additional Items |   |   |
| Section III: Totals - Sum of costs in each column |                  | \$4,681,296   | \$4,751,515   |
|   |                  | (Total)   | (Total)   |

**Section IV: Analysis of new successor agreement****NEW AGREEMENT ANALYSIS**

|   |                    |                    |                    |                    |  |
|---|--------------------|--------------------|--------------------|--------------------|--|
| Total Base Year(previous agreement)     | <u>\$4,681,296</u> |                    |                    |                    |  |
| Effective Date (m/d/yyyy)               | <u>1/1/2013</u>    | <u>1/1/2014</u>    | <u>1/1/2015</u>    | <u>1/1/2016</u>    |  |
| Percent Increase                        | <u>1.5%</u>        | <u>1.5%</u>        | <u>2.0%</u>        | <u>2.0%</u>        |  |
| Total cost of increase                  | <u>\$70,219</u>    | <u>\$71,273</u>    | <u>\$96,456</u>    | <u>\$98,385</u>    |  |
| Total base salary (successor agreement) | <u>\$4,751,515</u> | <u>\$4,822,788</u> | <u>\$4,919,244</u> | <u>\$5,017,629</u> |  |

**Section V: Impact of Settlement - average annual increase over term of agreement**

Percentage Impact (average per year over term of agreement) 1.75  
 Dollar Impact (average per year over term of agreement) \$84,083.00

**Section VI**

| Health Insurance (Indicate costs associated on each line) |  | Base Year   | Year 1      |
|---|--|-------------|-------------|
| Cost of Health Plan                                       |  | \$2,003,639 | \$1,911,858 |
| Employee Contributions                                    |  | \$14,560    | \$91,725    |
| Prescription  |  |             |             |
| Dental  |  |             |             |
| Vision  |  |             |             |

**The undersigned certifies that the foregoing figures are true and is aware that if any of the foregoing items are false, s/he is subject to punishment.**

**Section VII**